

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# F02000002300

Entity Name: GAIN INTERNATIONAL, INC.

Current Principal Place of Business:

221 N. FIGUEROA STREET, SUITE 1200
LOS ANGELES, CA 90012

New Principal Place of Business:

Current Mailing Address:

ATTN: GENERAL COUNSEL'S OFFICE
100 LAKE HART DRIVE-3500
ORLANDO, FL 32832

New Mailing Address:

FEI Number: 95-4578963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: ZOOK, DUANE E
Address: 660 INTERNATIONAL PARKWAY, SUITE 100
City-St-Zip: RICHARDSON, TX 75081 US

Title: CFO () Delete
Name: TJERNAGEL, MARK
Address: 100 LAKE HART DRIVE 3900
City-St-Zip: ORLANDO, FL 328320100

Title: COO () Delete
Name: RAGAN, RICK
Address: 660 INTERNATIONAL PARKWAY, SUITE 100
City-St-Zip: RICHARDSON, TX 75081

Title: S () Delete
Name: HAUER, SALLY E
Address: 100 LAKE HART DRIVE 3500
City-St-Zip: ORLANDO, FL 328320100

Title: D () Delete
Name: SELLERS, STEVE
Address: 100 LAKE HART DR 2100
City-St-Zip: ORLANDO, FL 32932

Title: D () Delete
Name: WALLACE, ANNE
Address: P.O. BOX 2463
City-St-Zip: FT. WORTH, TX 76114

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALLY HAUER

Electronic Signature of Signing Officer or Director

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03/19/2009

Date